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## **POWER OF ATTORNEY** and **CORRESPONDENCE ADDRESS** INDICATION FORM

| Application Number     | 10/596,126   |  |  |
|------------------------|--|--|--|
| Filing Date            | May 31, 2006   |  |  |
| First Named Inventor   | Eui Joon YOON  |  |  |
| Title                  | Growth method of nitride semiconductor layer and light emitting device using the growth method |  |  |
| Art Unit               |  |  |  |
| Examiner Name          |  |  |  |
| Attorney Docket Number | 504478.new   |  |  |

|   |                              | Attorney Do                 | cket Number | 504478.new |  |  |
|---|------------------------------|-----------------------------|-------------|------------|--|--|
| i hereby revoke all previous powers of attorney given in the above-identified application.  |                              |                             |             |            |  |  |
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| NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below.   |                              |                             |             |            |  |  |
|   |                              |                             |             |            |  |  |